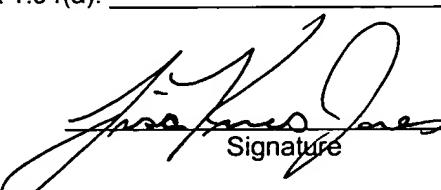


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a))		Docket Number (optional) 1998U007A.US														
	In re Application of Thomas H. Peterson															
	Application Number 09/396,266	Filed September 15, 1999														
	For Catalyst Composition for the Polymerization of Olefins															
	Group Art Unit 1713	Examiner Not Assigned														
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$ <u>110.00</u></td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$ <u>400.00</u></td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$ <u>950.00</u></td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$ <u>1,510.00</u></td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$ <u>2,060.00</u></td> </tr> <tr> <td> <input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</td> <td></td> </tr> <tr> <td> <input type="checkbox"/> The Commissioner is hereby authorized to charge any fees, which may be required, or credit any overpayment, to Deposit Account Number _____.</td> <td><i>I have enclosed a duplicate copy of this sheet.</i></td> </tr> </table> <p>I am the <input type="checkbox"/> assignee of record of the entire interest.</p> <p><input type="checkbox"/> applicant.</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> <p> Signature</p> <p><u>Lisa Kimes Jones</u> Typed or printed name</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">00000089 500589 09396266 12/21/1999 MARSHI 02 FC:115 110.00 CH</p>			<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ <u>110.00</u>	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>400.00</u>	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ <u>950.00</u>	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1,510.00</u>	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ <u>2,060.00</u>	 <input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		 <input type="checkbox"/> The Commissioner is hereby authorized to charge any fees, which may be required, or credit any overpayment, to Deposit Account Number _____.	<i>I have enclosed a duplicate copy of this sheet.</i>
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ <u>110.00</u>															
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>400.00</u>															
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ <u>950.00</u>															
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1,510.00</u>															
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ <u>2,060.00</u>															
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 <input type="checkbox"/> The Commissioner is hereby authorized to charge any fees, which may be required, or credit any overpayment, to Deposit Account Number _____.	<i>I have enclosed a duplicate copy of this sheet.</i>															

Burden Hour Statement This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.